

[illegible]

MONTHLY REPORT ON SWIMMING POOL OPERATION

Chapter HSS 172 of the Wisconsin Administrative Code requires that Monthly Reports on the operation of swimming pools be submitted to the Department. The pool operator or person in charge shall fill in the data indicated on the report as completely as possible.

SEND REPORTS TO: Waukesha County
Environmental Health Division
1320 Pewaukee Road, Room 260
Waukesha WI 53188

Name of Pool	Address	Operator
<p>1) The following items should be checked regularly to assure that they are being properly maintained: (Place an X if equipment is on hand and properly maintained.)</p> <div style="display: flex; flex-wrap: wrap;"><div style="width: 25%;"><input type="checkbox"/> First Aid Kit (24 unit)</div><div style="width: 25%;"><input type="checkbox"/> DPD Test Kit</div><div style="width: 25%;"><input type="checkbox"/> Two (2) Blankets</div><div style="width: 25%;"><input type="checkbox"/> Spine Board with Straps</div><div style="width: 25%;"><input type="checkbox"/> Handrails or Grabrails</div><div style="width: 25%;"><input type="checkbox"/> Shepherd's Crook or Ring Buoy</div><div style="width: 25%;"><input type="checkbox"/> Depth Markings</div><div style="width: 25%;"><input type="checkbox"/> Safety Line</div><div style="width: 25%;"><input type="checkbox"/> Lifeguard Chair</div></div>		
<p>2) PLEASE NOTE ANY CHANGE IN EQUIPMENT: (All equipment must be NSF approved or equivalent. If you have any questions regarding approved equipment, please call Waukesha County Environmental Health (262) 896-8300 before installation.</p> <div style="display: flex; justify-content: space-between;"><div>Item _____</div><div>Manufacturer _____</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>Model # _____</div><div>Installed by _____</div><div>Date _____</div></div>		
<p>3) Is there a new person responsible for pool maintenance?</p> <p>Yes <input type="checkbox"/> If so, please contact Waukesha County Environmental Health (262) 896-8300.</p>		<p>4) Are Lifeguards on duty?</p> <p>Yes <input type="checkbox"/> How many? _____</p>

REMARKS: Please comment on any unusual occurrence(s) and actions to correct conditions and chemical levels that do not comply with code requirements:

Signature _____

Title _____

Date _____